

# LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

414  
Lobbyist's Registration Number

## Instructions

- Print in ink or type.
- Complete form and return with \$100 registration fee to the Board of Ethics, 2415 Quail Dr., 3<sup>rd</sup> Floor, Baton Rouge, LA 70808, (225) 763-8777 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

1. NAME Frost Gregory D.  
Last First MI

2. BUSINESS PHONE 225-336-5200  
Area Code and Phone Number

3. BUSINESS ADDRESS 450 Laurel St., Baton Rouge, LA 70801  
Street and No. City State Zip

MAILING ADDRESS Same as Above  
Street and No. City State Zip

4. EMPLOYER Adams and Reese, LLP

5. EMPLOYER'S ADDRESS Same as Above  
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name Healthcare Provider Management  
Address P. O. Box 66776, Baton Rouge, LA 70896  
Business or purpose Seminars and publications  
Does this person pay you? No  
If No, who pays you? Adams and Reese, LLP

FOR OFFICE USE ONLY  
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WALSH CONSULTING

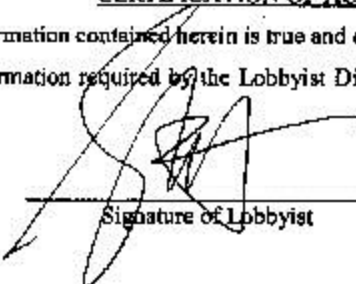
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2. Name La. Health Information Management Association  
Address 1103 Hunt Lane, Ruston, LA 71270  
Business or purpose Trade association  
Does this person pay you? Yes  
If No, who pays you? \_\_\_\_\_
3. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
4. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_

## CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.

  
\_\_\_\_\_  
Signature of Lobbyist

